BEST AVAILABLE COPY

									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECO										۱: ۵۸			
Effective December 29, 1999 55 11 8													
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
FOR			NUMBER FILED			NUMBER EXTRA			RATE	FEE	} [RATE	FEE
BASIC FEE										345.00	OR		690.00
TOTAL CLAIMS			4 minus 20=			*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			4 minus 3 =			• 1			X39=		OR	X78=	78°°
MULTIPLE DEPENDENT CLAIM PRESENT									+130=			+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2									OTAL		OR OR	TOTAL	768°°
CLAIMS AS AMENDED - PART II] •	OTHER	
						Column 2)	(Column 3)	lumn 3) SM		ENTITY	OR	SMALL	ENTITY
AMENDMENT A	4.8	REM/ AF	AIMS AINING TER DMENT		P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*		Minus	**		=		X39=		OR	X78=	
	FIRST PRESENTATION OF			MULTIPLE DEPEN		DENT CLAIM			-130=			+260=	
·									TOTAL		OR	TOTAL	
									DIT. FEE	<u></u>	OR ,	ADDIT. FEE	
			ımn 1) AIMS			Column 2) HIGHEST	(Column 3)	_		4001		1	4001
AMENDMENT B	•	AF	AINING TER IDMENT		NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	٠ 6		Minus	**	٥د	=	,	K\$ 9=		OR	X\$18=	
	Independent	.4		Minus	**	<u> </u>	=,	;	X39=		OR	X₹8=	84,00
	FIRST PRESE	N OF MU	JETIPLE DEF	'ENI	DENT CLAIM			-130=		OR	+260=		
								<u>L</u>	TOTAL			TOTAL	
		(Colu	ımn 1)		10	Column 2)	(Column 3)	ADI	DIT. FEE I		1-11	ADDIT. FEE	
<u>, </u>		CL/	AIMS			HIGHEST				ADDI-	1		ADDI-
AMENDMENT C		AF	AINING TER DMENT			NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	F	RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	•		Minus	**		=	>	(\$ 9= ·		OR	X\$18=	
	Independent	*		Minus	**		=		X39=		OR	X78=	
	FIRST PRESENTATION OF MULTIPLE DEPEND					DENT CLAIM						1260	
• 11	the entry in colur	mn 1 is le	ess than th	e entry in colu	mn 2	, write "0" in col	umn 3.		130= TOTAL		OR	+260=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEEOH												ADDIT. FEE	
	The "Highest Num	ber Prev	iously Pai	d For" (Total or	Inde	ependent) is the	highest number	found	in the app	propriate box	in col	umn 1.	